PART B - FEE(S) TRANSMITTAL

send the form, together with applicable fee(s), to: Mail
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(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where
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indicated unless do trated maintenance fee notification	below or directed otherwise ns.	in Block I, by (a) specifying	a new correspondence address	; and/or (b) indicating a sep	arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE	CE ADDRESS (Note: Use Block 1 for	any change of address)	Note: A certificate of	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying			
•				papers. Each addition	Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, muchave its own certificate of mailing or transmission.		
23911 7	590 03/08/2005			have its own certificat	e of mailing or transmission.		
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P.O. BOX 14300	0.00044.4200		I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.				
WASHINGTON, 1 09/2005 MBEYENE2 000	00007 10670252			1.0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	10 (100) 110 1000, 011 1110	(Depositor's name	
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FC:1501 1400.00 DP FC:1504 300.00 DP FC:8001 15.00 DP						(Date	
APPLICATION NO.	FILING DATE	FIRST NAM		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/670,252	09/26/2003		Kentaro Jumonji		056208.52793US	8571	
TITLE OF INVENTION: C	CAR CONTROL UNIT						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	06/08/2005	
EXAM	MINER	ART UNIT		CLASS-SUBCLASS]		
BEAULIEU, YONEL		3661		701-093000			
1. Change of correspondence address or indication of "Fee Address" CFR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custo Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a				
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Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the I	patent): 🔲 Individual 🕮 C	orporation or other private gr	roup entity Governmen	
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Authorized Signature	Vinet / Vus	lado	CENT J	SUNDERDIOK ^{June} n No. 29,004	e 7, 2005		
Typed or printed name _	James F. McKe	own Rec	gistratio	n No. 29,004 istration	No. 25,406		
This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	on is required by 37 CFR 1.3 lity is governed by 35 U.S.C. pplication form to the USPT s for reducing this burden, shinia 22313-1450. DO NOT 1-1450.	11. The information 122 and 37 CFR O. Time will vary tould be sent to the SEND FEES OR (on is required 1.14. This co depending u c Chief Infon COMPLETE	to obtain or retain a benefit by llection is estimated to take 12 pon the individual case. Any comation Officer, U.S. Patent and D FORMS TO THIS ADDRES	the public which is to file (an	ng gathering, preparing, an ime you require to complet partment of Commerce, P.C. for Patents, P.O. Box 1450	